

Fig. 1

109673500.060401

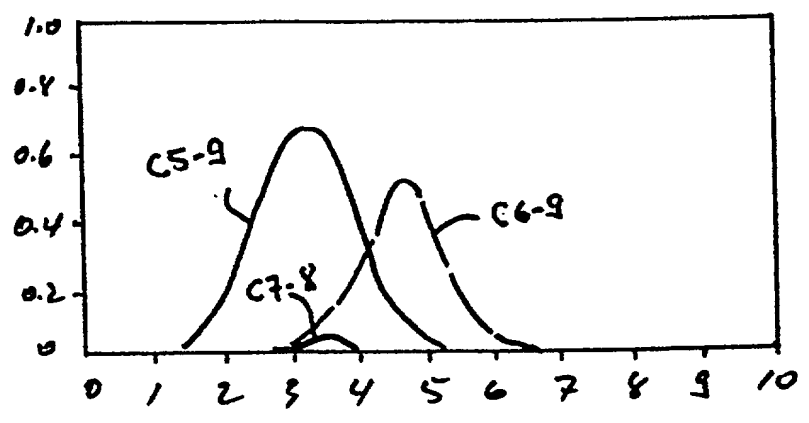
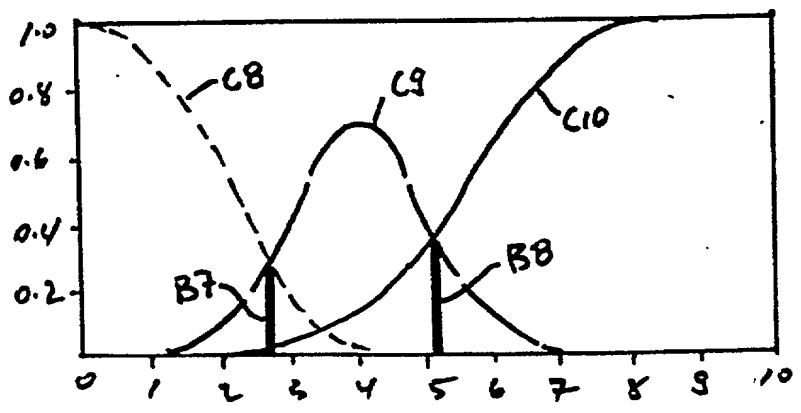
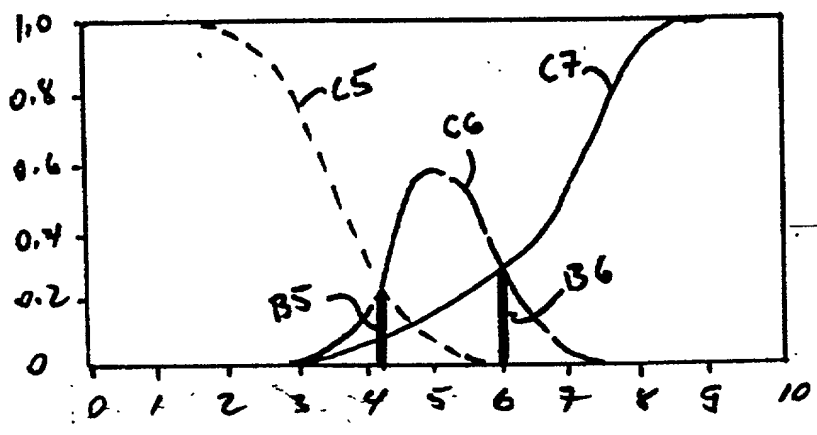


Fig. 2

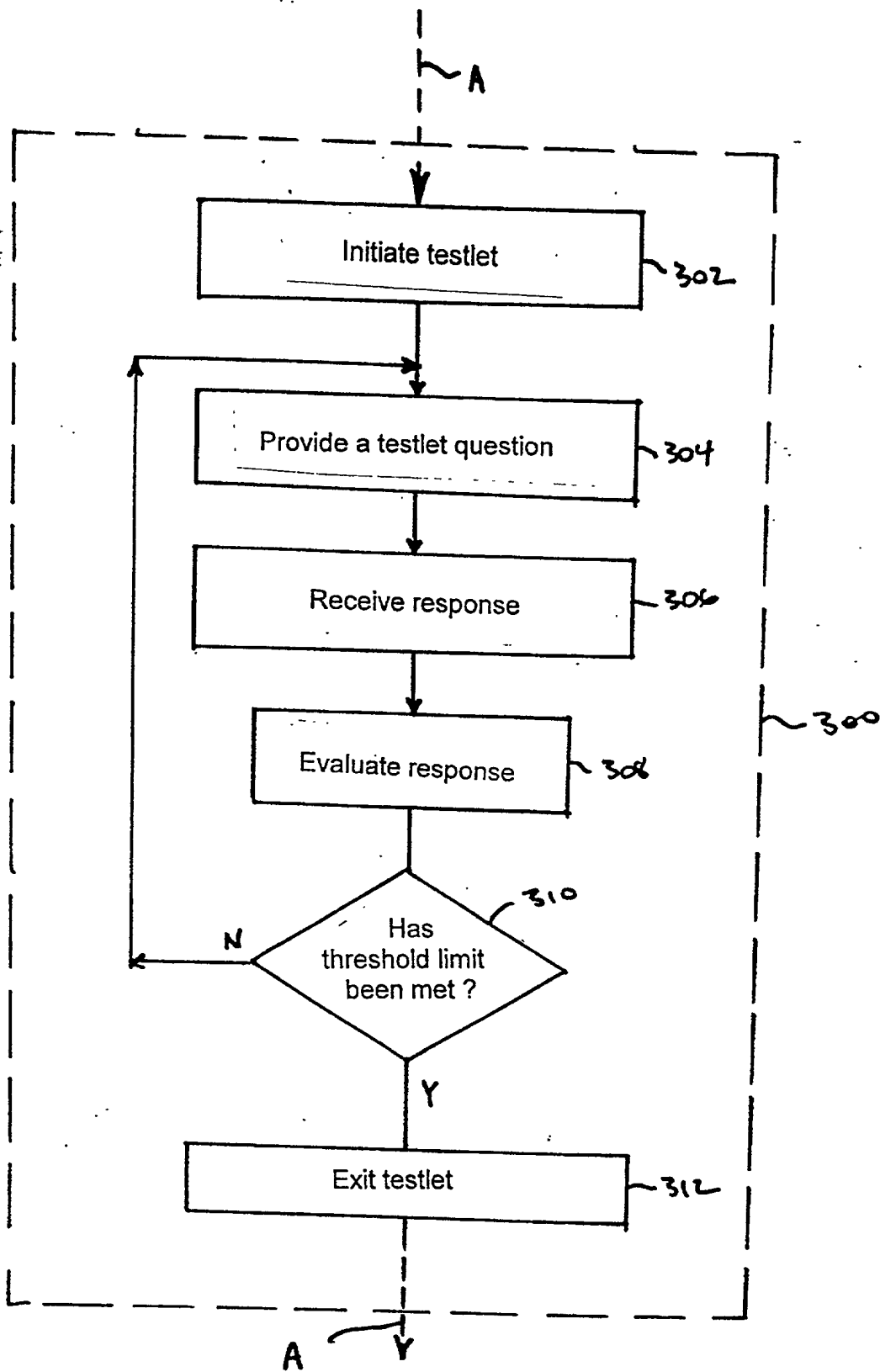


Fig. 3

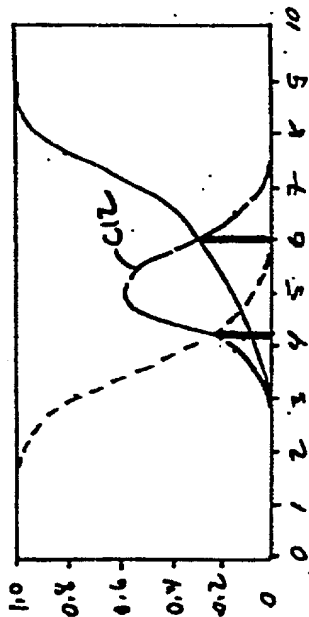


Fig. 4A-1

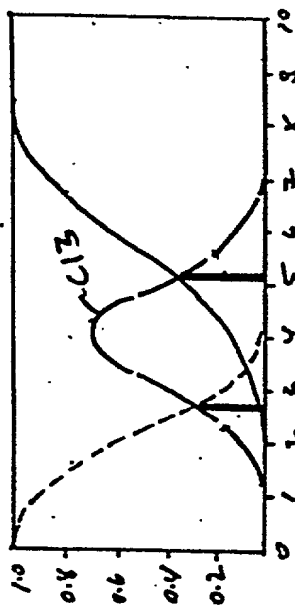


Fig. 4A-2

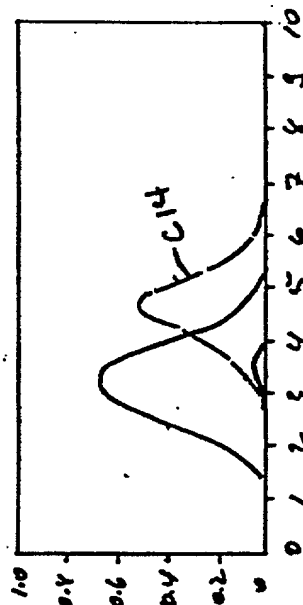


Fig. 4A-3

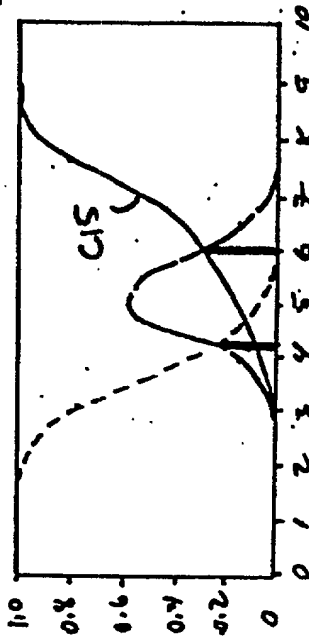


Fig. 4B-1

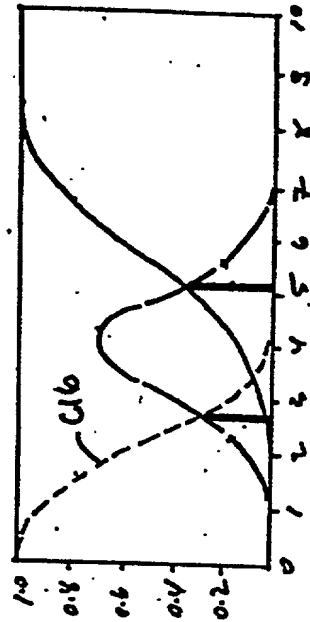


Fig. 4B-2

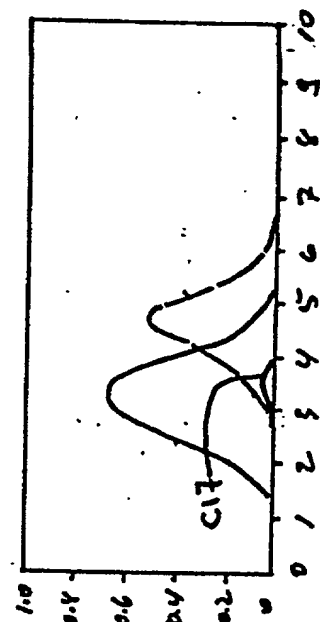


Fig. 4B-3

Fig. 4

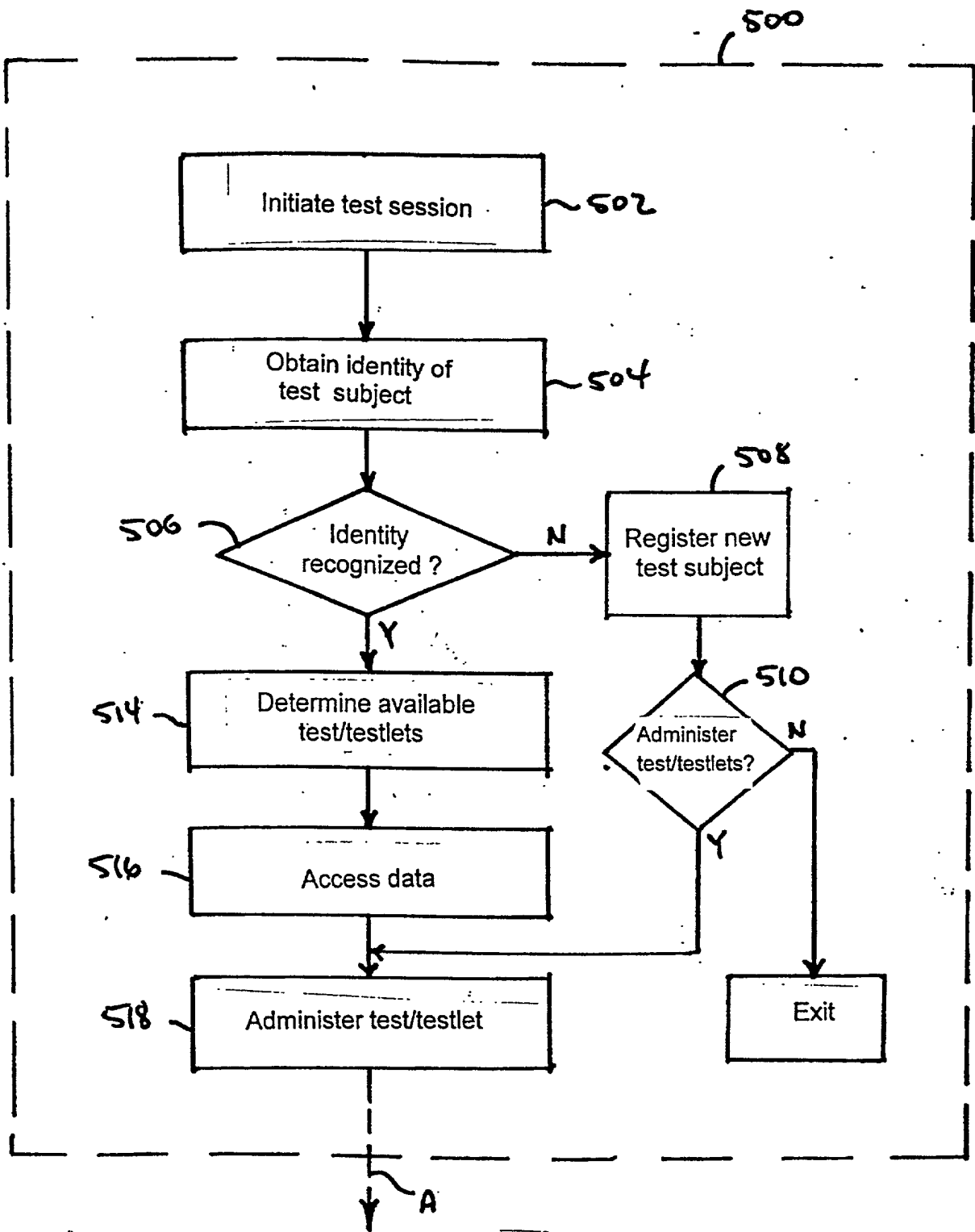


Fig. 5

TABLE 1. (continued)	
Variable	Mean
Age	25.0
Gender	Male
Marital status	Married
Education	High school
Occupation	Unemployed
Income	\$10,000
Health status	Good
Smoking status	Non-smoker
Alcohol consumption	None
Exercise frequency	None
Stress level	Low
Family size	2
Religion	Catholic
Political affiliation	Democrat
Travel frequency	None
Food consumption	Fast food
Sleeping hours	7
Work hours	40
Commuting time	30
Household chores	1 hour
Volunteering hours	0
Charitable donations	\$0
Gift giving frequency	None
Gift giving amount	\$0
Gift giving occasion	Birthdays
Gift giving recipient	Family
Gift giving method	Online
Gift giving satisfaction	High
Gift giving frequency	Monthly
Gift giving amount	\$50
Gift giving occasion	Birthdays
Gift giving recipient	Family
Gift giving method	Online
Gift giving satisfaction	High
Gift giving frequency	Monthly
Gift giving amount	\$50
Gift giving occasion	Birthdays
Gift giving recipient	Family
Gift giving method	Online
Gift giving satisfaction	High
Gift giving frequency	Monthly
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Gift giving occasion	Birthdays
Gift giving recipient	Family
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Gift giving occasion	Birthdays
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Gift	

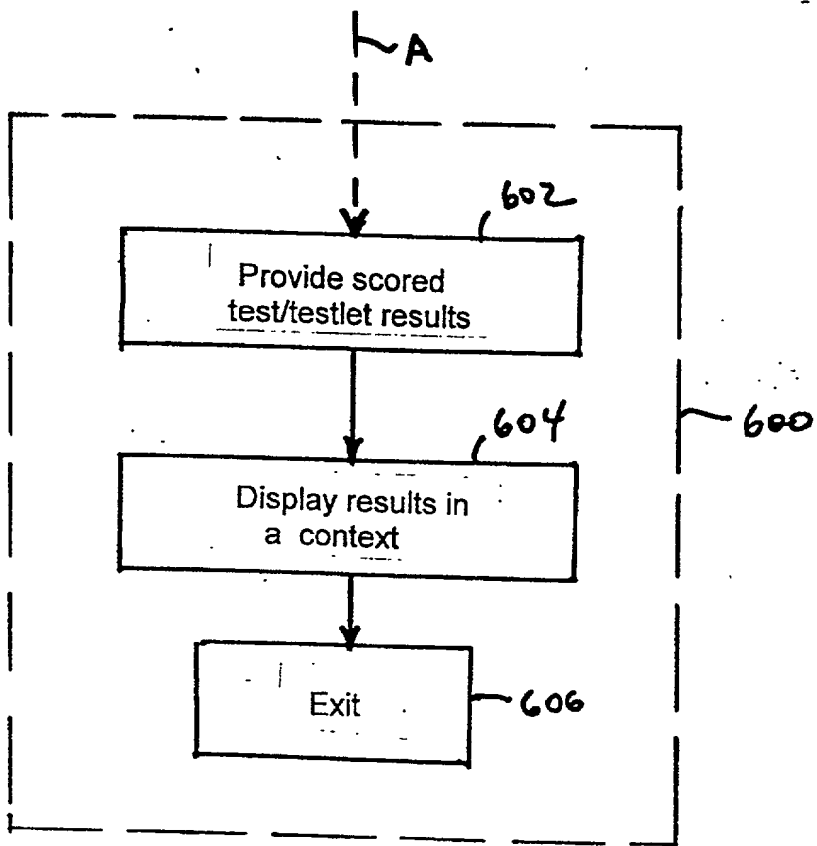


Fig. 6

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Dynamic Health Survey™

This survey asks you questions about how your physical and emotional health affect things you do every day. You are the expert on these aspects of your overall health. Please answer the questions by clicking the answer that best describes how you have been doing during the PAST 4 WEEKS. If you are not sure about a question, please, give the best answer you can.




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Fig. 7-1

https://www.amIhealthy.com/DynHA/stepone.asp# - Microsoft Internet Explorer

amIhealthy.com™

 **Dynamic Health Survey™**

1. Overall, how would you rate your health during the past 4 weeks?

☒ Excellent



☐ Very good

☐ Good

☐ Fair

☐ Poor

☐ Very poor

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Start

Fig. 7-2

09873500-060401

https://www.amIhealthy.com/DynIA/NewStep.asp# - Microsoft Internet Explorer

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 **Dynamic Health Survey™**

2. The following questions are about activities you might do during a typical day. During the past 4 weeks, how much did physical health problems limit your usual physical activities (such as walking or climbing stairs)?



☒ Not at all

☐ Very little

☐ Somewhat

☐ Quite a lot

☐ Could not do physical activities


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Fig. 7-3

104090" 005672660

https://www.amIhealthy.com/DynIIA/NextStep.asp# - Microsoft Internet Explorer

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 **Dynamic Health Survey™**

3. During the PAST 4 WEEKS, how much difficulty did you have doing your daily work, both inside and outside the house, because of your physical health



☒ None at all

☐ A little bit

☐ Some

☐ Quite a lot

☐ Could not do daily work


[Next](#)

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Fig. 7-4

https://www.amIhealthy.com/DynHA/NextStep.asp# - Microsoft Internet Explorer

amIhealthy.com™

 **Dynamic Health Survey™**

4. How much **BODILY PAIN** have you had during the **PAST 4 WEEKS?**

☒ None



☐ Very mild

☐ Mild

☐ Moderate

☐ Severe

☐ Very severe


 

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Fig. 7-5

https://www.amIhealthy.com/DynIA/NextStep.asp# - Microsoft Internet Explorer

amIhealthy.com™

 **Dynamic Health Survey™**

5. These questions are about how you feel and how things have been with you during the past 4 weeks. For each question, please give the one answer that comes closest to the way you have been feeling.

During the PAST 4 WEEKS, how much energy did you have?



☒ Very much

☐ Quite a bit

☐ Some

☐ A little

☐ None

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Continue to next question

1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100

Fig. 7-6

https://www.amIhealthy.com/DynIA/NextStep.asp - Microsoft Internet Explorer

amIhealthy.com™

 **Dynamic Health Survey™**

6. The next questions ask about your social activities.

During the PAST 4 WEEKS, how much did your physical health or emotional problems limit your usual social activities with family or friends?



☒ Not at all

☐ Very little

☐ Somewhat

☐ Quite a lot

☐ Could not do social activities


[Next](#)

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Fig. 7-7

https://www.amIhealthy.com/DynIA/NextStep.asp# - Microsoft Internet Explorer

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 **Dynamic Health Survey™**

7. These questions are about how you feel and how things have been with you during the past 4 weeks. For each question, please give the one answer that comes closest to the way you have been feeling.

How much have you been bothered by emotional problems (such as feeling anxious, depressed or irritable)?



☒ Not at all

☐ Slightly

☐ Moderately

☐ Quite a lot

☐ Extremely


Next

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Fig. 7-8

https://www.amIhealthy.com/DynIA/NextStep.asp# - Microsoft Internet Explorer

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 **Dynamic Health Survey™**

8. During the PAST 4 WEEKS, how much did personal or emotional problems keep you from doing your usual work, school or other daily activities?



☒ Not at all

☐ Very little

☐ Somewhat

☐ Quite a lot

☐ Could not do daily activities

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Fig. 7-9

09873500-060401

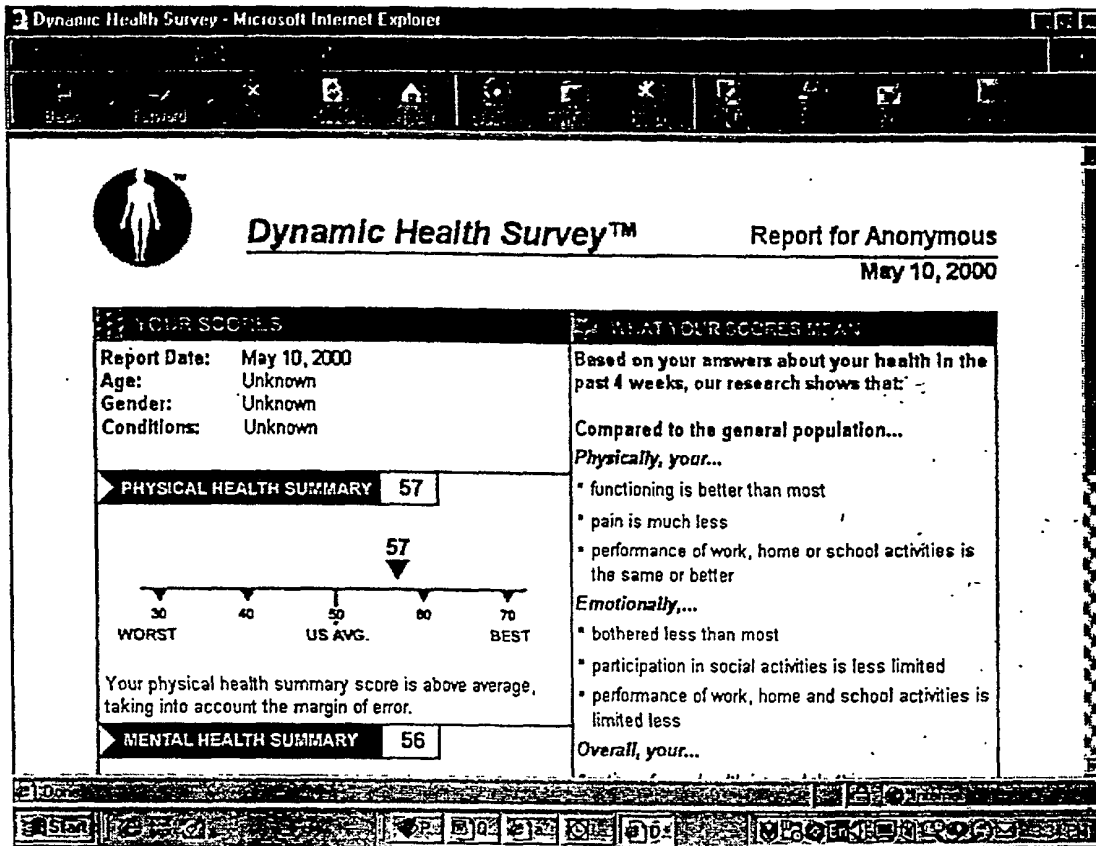
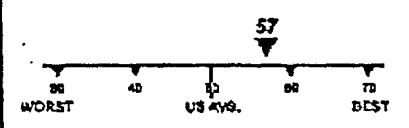
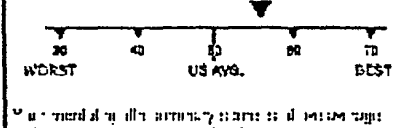


Fig. 7-10



Dynamic Health Survey™

Report for Anonymous

YOUR SCORES		WHAT YOUR SCORES MEAN	
Report Date:	May 10, 2000	Based on your answers about your health in the past 4 weeks, our research shows that:	
Age:	Unknown	Compared to the general population...	
Gender:	Unknown	Physically, you...	
Conditions:	Unknown	Emotionally...	
PHYSICAL HEALTH SUMMARY 57		Overall, you...	
		* You are in the middle of the range.	
* You are in the middle of the range, but you are taking into account the margin of error.		* You are in the middle of the range, but you are taking into account the margin of error.	
MENTAL HEALTH SUMMARY 56		Overall, you...	
		* You are in the middle of the range.	
* You are in the middle of the range, but you are taking into account the margin of error.		* You are in the middle of the range, but you are taking into account the margin of error.	
YOUR PROGRESS		WHAT YOU SHOULD DO	
Date	Physical Health Summary	Mental Health Summary	
Current: not fill			
* We encourage you to become a regular user of this report and increase your response in future surveys.		* In three months, take this survey again to continue monitoring your progress.	
		* By sharing this information with your health care provider, you can work together to make sure that your physical condition is being monitored properly.	
<small>© 2000 Dynamic Health Survey, Inc. All rights reserved. This report is for informational purposes only and should not be used as a substitute for professional medical consultation.</small>			

powered by

Fig. 7-10

00373500-060401

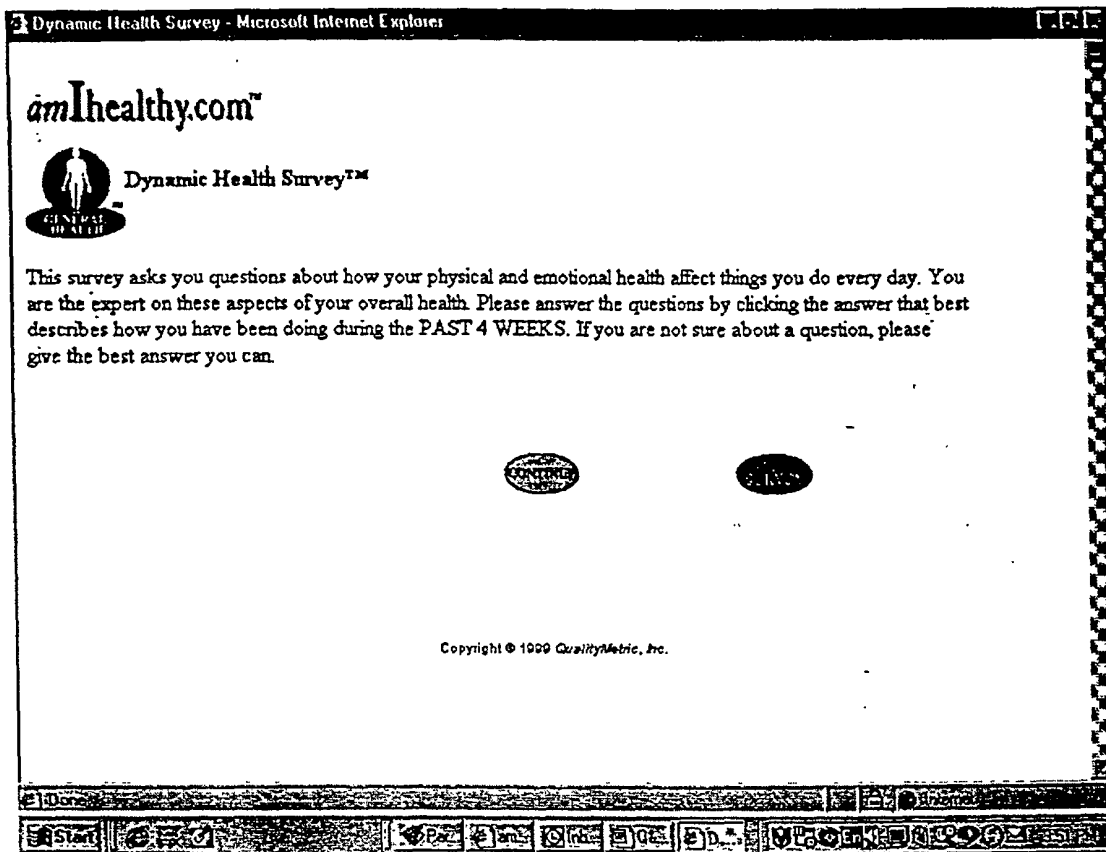



Fig. 8-1

09873500-060401
T04090-005E2860

https://www.amIhealthy.com/DynIIA/stepone.asp# - Microsoft Internet Explorer

amIhealthy.com™

 **Dynamic Health Survey™**

1. Overall, how would you rate your health during the past 4 weeks?

☐ Excellent



☐ Very good

☐ Good

☐ Fair

☐ Poor

☒ Very poor


 

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Fig. 8-2

https://www.amIhealthy.com/DynIIA/NextStep.asp# - Microsoft Internet Explorer

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 **Dynamic Health Survey™**

2. How TRUE or FALSE is the following statement for you? I am in poor health.



☒ Definitely true

☐ Mostly true

☐ Don't know

☐ Mostly false

☐ Definitely false

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Fig. 8-3

09873500-060401

2007-06-06 10:00:00

https://www.amIhealthy.com/DynIIA/NextStep.asp# - Microsoft Internet Explorer

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 **Dynamic Health Survey™**

3. In general, would you say your health is:



☐ Excellent

☐ Very good

☐ Good

☐ Fair

☒ Poor


 

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Fig. 8-4

https://www.amIhealthy.com/DynHIA/NextStep.asp# - Microsoft Internet Explorer

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 Dynamic Health Survey™

4. How TRUE or FALSE is the following statement for you? I have been feeling sickly for a long time.



☐ Definitely true

☒ Mostly true

☐ buttonn't know

☐ Mostly false

☐ Definitely false


 

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Fig. 8-5

https://www.amIhealthy.com/DynIIA/NextStep.asp# - Microsoft Internet Explorer

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 **Dynamic Health Survey™**

5. The following questions are about activities you might do during a typical day. During the past 4 weeks, how much did physical health problems limit your usual physical activities (such as walking or climbing stairs)?



☐ Not at all

☐ Very little

☐ Somewhat

☒ Quite a lot

☐ Could not do physical activities


 

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Fig. 8-6

https://www.amIhealthy.com/DynHA/NextStep.asp# - Microsoft Internet Explorer

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 **Dynamic Health Survey™**

6. Does your health now limit you in walking one hundred yards? If so how much?

☒ Yes, limited a lot

☐ Yes, limited a little

☐ No, not limited at all

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Navigation bar: Back, Forward, Home, Search, etc.

Fig. 8-7.

0987500-060401

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 Dynamic Health Survey™

6. Does your health now limit you in walking one hundred yards? If so how much?

☒ Yes, limited a lot

☐ Yes, limited a little

☐ No, not limited at all


 

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Fig. 8-8

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 **Dynamic Health Survey™**

7. During the PAST 4 WEEKS, how much difficulty did you have doing your daily work, both inside and outside the house, because of your physical health



☐ None at all

☐ A little bit

☐ Some

☒ Quite a lot

could not do daily work


 

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Fig. 8-9

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 **Dynamic Health Survey™**

8. During the PAST 4 WEEKS, how much of the time were you limited in the KIND of work or other activities you did AS A RESULT OF YOUR PHYSICAL HEALTH?



☐ All of the time

☒ Most of the time

☐ Some of the time

☐ A little of the time

☐ None of the time


 

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Fig. 8-10

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 **Dynamic Health Survey™**

9. During the **PAST 4 WEEKS**, how much of the time have you had **DIFFICULTY** performing work or other activities **AS A RESULT OF YOUR PHYSICAL HEALTH** (for example, it took extra effort)?



☒ All of the time

☐ Most of the time

☐ Some of the time

☐ A little of the time

☐ None of the time


 

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Fig. 8-11

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 **Dynamic Health Survey™**

10. How much BODILY PAIN have you had during the PAST 4 WEEKS?

☐ None



☐ Very mild

☐ Mild

☐ Moderate

☒ Severe

☐ Very severe


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L: 1

Fig. 8-12

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 **Dynamic Health Survey™**

11. During the PAST 4 WEEKS, how much did pain interfere with your normal work (including both work outside the home and housework)?



☐ Not at all

☐ A little bit

☐ Moderately

☒ Quite a bit

☐ Extremely


 

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Fig. 8-13

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 **Dynamic Health Survey™**

12. During the PAST 4 WEEKS, how much did pain interfere with your recreational activities?



☐ Not at all

☐ A little bit

☐ Moderately

☒ Quite a bit

☐ Extremely


 

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Fig. 8-14

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 Dynamic Health Survey™

13. These questions are about how you feel and how things have been with you during the past 4 weeks. For each question, please give the one answer that comes closest to the way you have been feeling.

During the PAST 4 WEEKS, how much energy did you have?



☐ Very much

☐ Quite a bit

☒ Some

☐ A little

☐ None


 

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Fig. 8-15

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 **Dynamic Health Survey™**

14. How much of the time DURING THE PAST 4 WEEKS did you feel tired?



☐ All of the time

☐ Most of the time

☒ Some of the time

☐ A little of the time

☐ None of the time


 

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Fig. 8-16

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 **Dynamic Health Survey™**

15. How much of the time DURING THE PAST 4 WEEKS did you feel worn out?



☐ All of the time

☐ Most of the time

☒ Some of the time

☐ A little of the time

☐ None of the time


 

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Fig. 8-17.

https://www.amihealthy.com/DynIIA/NextStep.asp# - Microsoft Internet Explorer

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 **Dynamic Health Survey™**

16. How much of the time DURING THE PAST 4 WEEKS did you have a lot of energy?



☐ All of the time

☐ Most of the time

☒ Some of the time

☐ A little of the time

☐ None of the time


 

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Fig. 8-18

https://www.amIhealthy.com/DynHA/NextStep.asp# - Microsoft Internet Explorer

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 **Dynamic Health Survey™**

17. How much of the time DURING THE PAST 4 WEEKS did you feel full of life?



☐ All of the time

☐ Most of the time

☐ Some of the time

☒ A little of the time

☐ None of the time


 

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Fig. 8-19

https://www.amIhealthy.com/DynIIA/NextStep.asp# - Microsoft Internet Explorer

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 **Dynamic Health Survey™**

18. The next questions ask about your social activities.

During the PAST 4 WEEKS, how much did your physical health or emotional problems limit your usual social activities with family or friends?



☐ Not at all

☐ Very little

☐ Somewhat

☐ Quite a lot

☒ Could not do social activities


 

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Fig. 8-20

https://www.amIhealthy.com/DynIIA/NextStep.asp# - Microsoft Internet Explorer

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 **Dynamic Health Survey™**

19. During the PAST 4 WEEKS, how much of the TIME has your
PHYSICAL HEALTH OR EMOTIONAL PROBLEMS interfered
with your social activities (like visiting with friends, relatives, etc.)?



☒ All of the time

☐ Most of the time

☐ Some of the time

☐ A little of the time

☐ None of the time


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Fig. 8-21

09673500-060401
T01090-00562860

https://www.amIhealthy.com/DynHA/NextStep.asp - Microsoft Internet Explorer

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 **Dynamic Health Survey™**

20. During the PAST 4 WEEKS, to what EXTENT has your PHYSICAL HEALTH OR EMOTIONAL PROBLEMS interfered with your normal social activities with family, friends, neighbors, or groups?



☐ Not at all

☐ Slightly

☐ Moderately

☐ Quite a bit

☒ Extremely


 

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Fig. 8-22

https://www.amIhealthy.com/DynIIA/NextStep.asp# - Microsoft Internet Explorer

amIhealthy.com™

 **Dynamic Health Survey™**

21. These questions are about how you feel and how things have been with you during the past 4 weeks. For each question, please give the one answer that comes closest to the way you have been feeling.

How much have you been bothered by emotional problems (such as feeling anxious, depressed or irritable)?



☐ Not at all

☐ Slightly

☐ Moderately

☒ Quite a lot

☐ Extremely


 

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Fig. 8-23

https://www.amIhealthy.com/DynIIA/NextStep.asp# - Microsoft Internet Explorer

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 **Dynamic Health Survey™**

22. During the past month, how depressed (at its worst) have you felt?

☐ Extremely depressed



☒ Very depressed

☐ Quite depressed

☐ Somewhat depressed

☐ A little depressed

☐ Not depressed at all


 

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Fig. 8-24.

https://www.amIhealthy.com/DynHA/NextStep.asp# - Microsoft Internet Explorer

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 **Dynamic Health Survey™**

23. During the past month, how much of the time have you been in low or very low spirits?

☒ All of the time



☐ Most of the time

☐ A good bit of the time

☐ Some of the time

☐ A little of the time

☐ None of the time


 

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Fig. 8-25

https://www.amihealthy.com/DynIA/NextStep.asp# - Microsoft Internet Explorer

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 **Dynamic Health Survey™**

24. During the PAST 4 WEEKS, how much did personal or emotional problems keep you from doing your usual work, school or other daily activities?



☐ Not at all

☐ Very little

☐ Somewhat

☒ Quite a lot

☐ Could not do daily activities

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Fig. 8-26

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Dynamic Health Survey™

25. During the PAST 4 WEEKS, how much of the time have you cut down on the AMOUNT OF TIME you spent on work or other activities AS A RESULT OF ANY EMOTIONAL PROBLEMS (such as feeling depressed or anxious)?

- ☐ All of the time
- ☒ Most of the time
- ☐ Some of the time
- ☐ A little of the time
- ☐ None of the time



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Fig. 8-27

09873500-060401

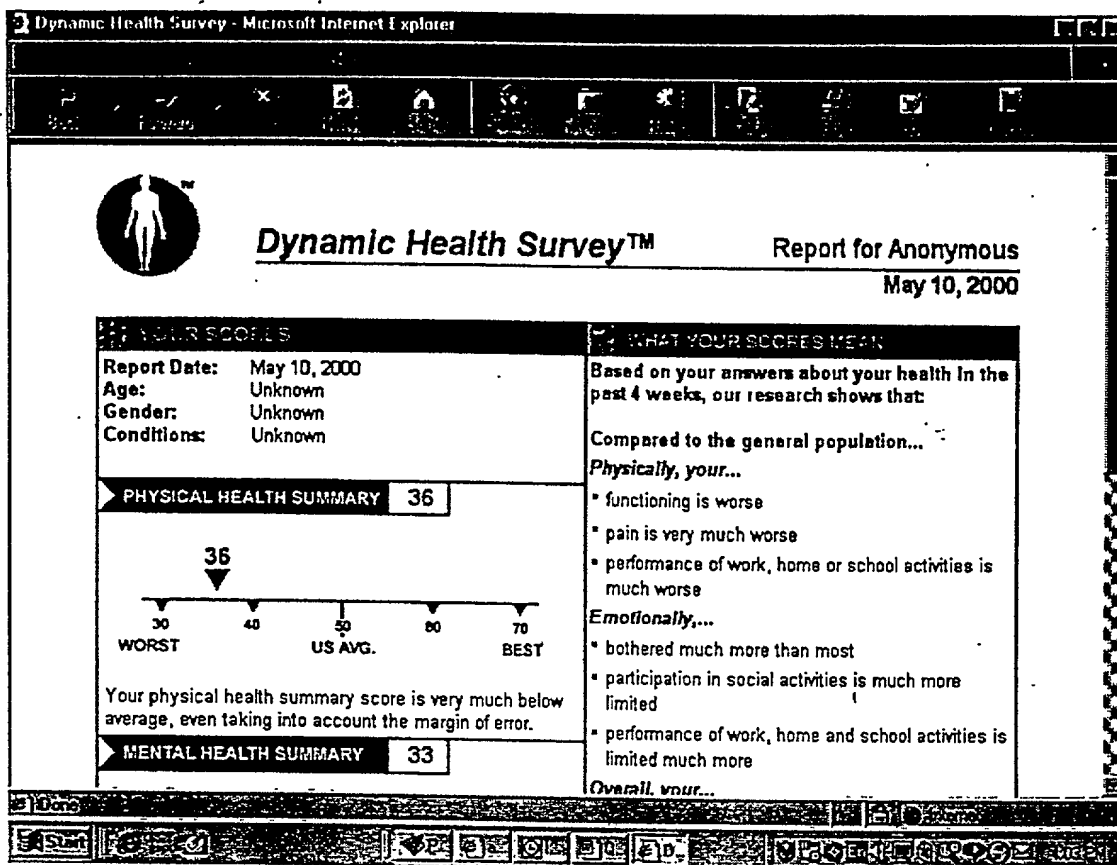


Fig. 8-28

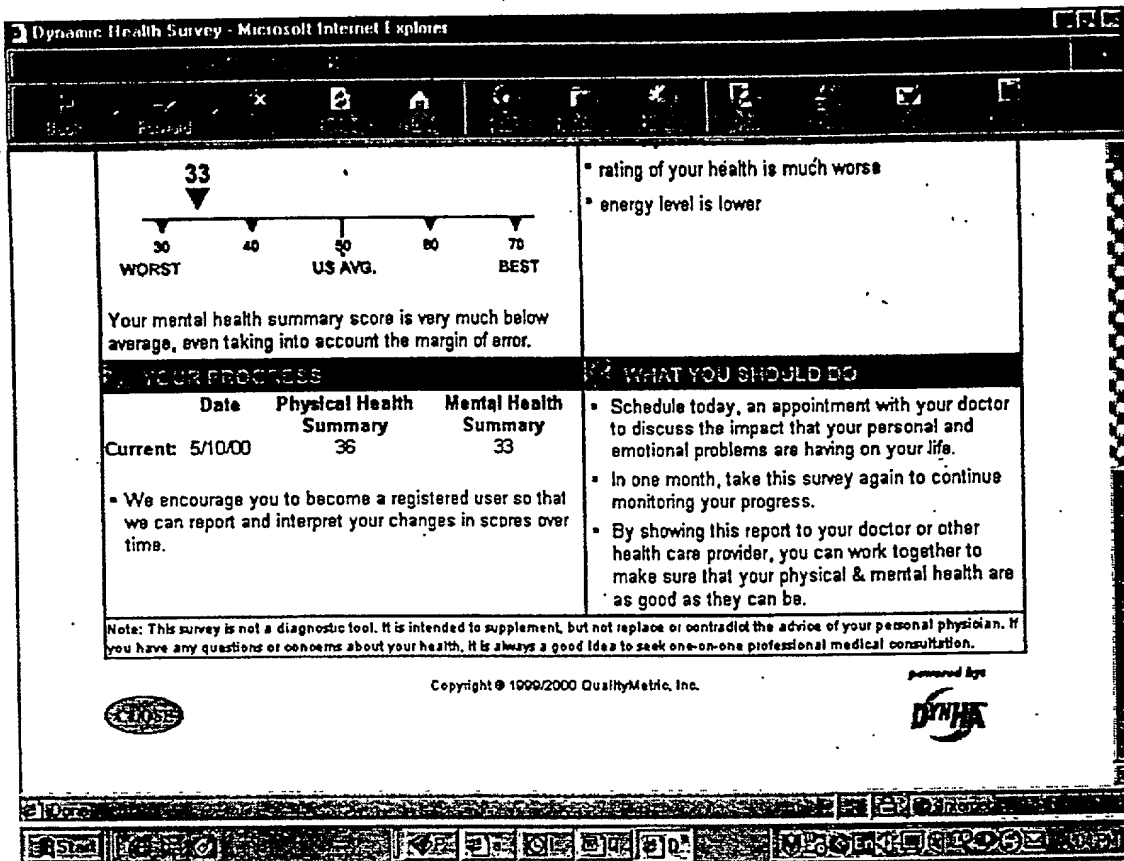


Fig. 8-28



Dynamic Health Survey™

Report for Anonymous

YOUR SCORES		WHAT YOUR SCORES MEAN	
Report Date:	May 11, 2000	Based on your answers about your health in the past 4 weeks, our research shows that:	
Age:	Unknown	Compared to the general population...	
Gender:	Unknown	Physically, you...	
Conditions:	Unknown	<ul style="list-style-type: none"> • functioning is worse • pain is very much worse • performance of work/home or school activities is much worse 	
PHYSICAL HEALTH SUMMARY 36		Emotionally,...	
<p>36</p> <p>30 40 50 60 70</p> <p>WORST US AVG. BEST</p> <p>Your physical health summary score is very much below average, even taking into account the margin of error.</p>		<ul style="list-style-type: none"> • bothered much more than most • participation in social activities is much more limited • performance of work/home or school activities is much more limited 	
MENTAL HEALTH SUMMARY 33			
<p>33</p> <p>30 40 50 60 70</p> <p>WORST US AVG. BEST</p> <p>Your mental health summary score is very much below average, even taking into account the margin of error.</p>		<ul style="list-style-type: none"> • rating of your health is much worse • energy level is lower 	
YOUR PROGRESS		WHAT YOU SHOULD DO	
Date	Physical Health Summary	Mental Health Summary	<ul style="list-style-type: none"> • Schedule a time to meet with your doctor to discuss the impact that your physical and emotional problems are having on your life. • In one month, take the survey again to continue monitoring your progress. • By showing this report to your doctor or other health care provider, you can work together to make sure that your physical & mental health are as good as they can be.
Current: 5/10/00	36	33	
<p>We encourage you to become a registered user so that we can report and interpret your changes in scores over time.</p>			

Fig. 8-28